

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: LUO et al.
Serial No.: 10/596,651
Filed: June 20, 2006
For: CRF RECEPTOR ANTAGONISTS AND METHODS RELATING THERETO

Commissioner for Patents
Mail Stop: PCT
P.O. Box 1450
Alexandria, Va 22313-1450

RESPONSE TO NOTIFICATION OF MISSING REQUIREMENTS
UNDER 35 U.S.C. 371 (DO/EO/US)

Sir:

This letter is in response to the "Notification of Missing Requirements" mailed on January 25, 2007, which indicated that the signatures of the inventors on the Declaration for the subject patent application are missing. A copy of this notice is enclosed.

Also enclosed, please find a Declaration and Power of Attorney for the subject patent application which has been fully executed by the inventors of the subject patent application in compliance with 37 C.F.R. 1.63.

Please charge the **\$130.00** surcharge for late filing of the fully executed declaration.

Applicants hereby petition for an extension of time for response from the date of the Examiner's action as needed, the fee being as follows:

| | | |
|-------------------------------------|-----------------------------|-------------|
| <input type="checkbox"/> | one month extension..... | \$ 120.00 |
| <input type="checkbox"/> | two months extension..... | \$ 450.00 |
| <input checked="" type="checkbox"/> | three months extension..... | \$ 1,020.00 |
| <input type="checkbox"/> | four months extension | \$ 1,590.00 |
| <input type="checkbox"/> | five months extension | \$ 2,160.00 |

Charge **\$1,150.00** to Deposit Account No. **19-2570**.

U.S. Serial No. 10/596,651
Group Art Unit: Not Yet Assigned

Please charge any additional requisite fees for filing the enclosed Declaration and Power of Attorney or credit any over-payment to Deposit Account No. 19-2570.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Laura K. Madden". The signature is fluid and cursive, with the first name "Laura" and last name "Madden" clearly distinguishable.

Laura K. Madden
Agent for Applicants
Registration No. 48,352

GLAXOSMITHKLINE
Corporate Intellectual Property - UW2220
P.O. Box 1539
King of Prussia, PA 19406-0939
Phone (610) 270-7339
Facsimile (610) 270-5090
N:\lkm\PB60000\PB60643\TO BE EFILED\Resp_Notice_Missing_Reqs.doc